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U.S. PTO

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Please type a plus sign (+) inside this box → Approved for use through 10/31/2002. OMB 0651-0072  
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		<b>Attorney Docket No.</b> P48-1240-1
		<b>First Inventor</b> Paul Aubin
		<b>Title</b> THERMAL PRINthead WITH MEMORY
		<b>Express Mail Label No.</b> EL701910673US

(Only for new nonprovisional applications under 37 CFR 1.53(b))

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i>		<b>ADDRESS TO:</b> Assistant Commissioner for Patents Box Patent Application Washington, DC 20231
1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i>		7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
2. <input type="checkbox"/> Applicant claims small entity status. <i>See 37 CFR 1.27.</i>		8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i>
3. <input checked="" type="checkbox"/> Specification [Total Pages 78] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"> <li>- Descriptive title of the invention</li> <li>- Cross Reference to Related Applications</li> <li>- Statement Regarding Fed sponsored R &amp; D</li> <li>- Reference to sequence listing, a table, or a computer program listing appendix</li> <li>- Background of the Invention</li> <li>- Brief Summary of the Invention</li> <li>- Brief Description of the Drawings (if filed)</li> <li>- Detailed Description</li> <li>- Claim(s)</li> <li>- Abstract of the Disclosure</li> </ul>		a. <input type="checkbox"/> Computer Readable Form (CRF)
4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [ Total Sheets 49 ]		b. Specification Sequence Listing on: <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li> <li>ii. <input type="checkbox"/> paper</li> </ul>
5. Oath or Declaration [ Total Pages ]		c. <input type="checkbox"/> Statements verifying identity of above copies
a. <input type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for continuation/divisional with Box 18 completed)</i> <ul style="list-style-type: none"> <li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b>            Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li> </ul>		9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s))
6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76		10. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input type="checkbox"/> Power of <i>(when there is an assignee)</i> <input type="checkbox"/> Attorney
		11. <input type="checkbox"/> English Translation Document (if applicable)
		12. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations
		13. <input type="checkbox"/> Preliminary Amendment
		14. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i>
		15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i>
		16. <input type="checkbox"/> Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent.
		17. <input checked="" type="checkbox"/> Other: <i>Petition for Extension of Time (3mos)</i>

18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

 Continuation     Divisional     Continuation-In-part (CIP)

of prior application No. 09 / 288,277

Group Art Unit: 2861

Prior application information:

Examiner K. Fegans

For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

**19. CORRESPONDENCE ADDRESS**

<input type="checkbox"/> Customer Number or Bar Code Label	(Insert Customer No. or Attach bar code label here)			or	<input type="checkbox"/> Correspondence address below
Name	Marina F. Cunningham				
Address	McCormick, Paulding & Huber LLP Cityplace II, 185 Asylum Street				
City	Hartford	State	CT	Zip Code	06103-3402
Country	USA	Telephone	860.549.5290	Fax	860.527.0464
Name (Print/Type)	Marina F. Cunningham	Registration No. (Attorney/Agent)	38,419		
Signature	<i>Marina F. Cunningham</i>		Date	July 6, 2001	

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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09/06/01

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# FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

TOTAL AMOUNT OF PAYMENT (\$ 1,974.00)

**Complete if Known**

Application Number	
Filing Date	Herewith
First Named Inventor	Paul Aubin
Examiner Name	
Group Art Unit	
Attorney Docket No.	P48-1240-1

**METHOD OF PAYMENT**

1.  The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number **13-0235**

Deposit Account Name \_\_\_\_\_

- Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
 Applicant claims small entity status. See 37 CFR 1.27

2.  Payment Enclosed:

Check  Credit card  Money Order  Other

**FEE CALCULATION (continued)****3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105	130	205 Surcharge - late filing fee or oath	
127	50	227 25 Surcharge - late provisional filing fee or cover sheet	
139	130	139 Non-English specification	
147	2,520	147 2,520 For filing a request for ex parte reexamination	
112	920*	112 920* Requesting publication of SIR prior to Examiner action	
113	1,840*	113 1,840* Requesting publication of SIR after Examiner action	
115	110	215 Extension for reply within first month	
116	390	216 Extension for reply within second month	890.00
117	890	217 Extension for reply within third month	
118	1,390	218 Extension for reply within fourth month	
128	1,890	228 Extension for reply within fifth month	
119	310	219 Notice of Appeal	
120	310	220 Filing a brief in support of an appeal	
121	270	221 Request for oral hearing	
138	1,510	138 Petition to institute a public use proceeding	
140	110	240 Petition to revive - unavoidable	
141	1,240	241 Petition to revive - unintentional	
142	1,240	242 Utility issue fee (or reissue)	
143	440	243 Design issue fee	
144	600	244 Plant issue fee	
122	130	122 Petitions to the Commissioner	
123	50	123 Petitions related to provisional applications	
126	240	126 Submission of Information Disclosure Stmt	
581	40	581 Recording each patent assignment per property (times number of properties)	
146	710	246 Filing a submission after final rejection (37 CFR § 1.129(a))	
149	710	249 For each additional invention to be examined (37 CFR § 1.129(b))	
179	710	279 Request for Continued Examination (RCE)	
169	900	169 Request for expedited examination of a design application	
Other fee (specify) _____			

SUBTOTAL (1) (\$ 710.00)

**2. EXTRA CLAIM FEES**

	Extra Claims	Fee from below	Fee Paid
Total Claims	23	-20** = 3 X 18.00	= 54.00
Independent Claims	7	- 3*** = 4 X 80.00	= 320.00
Multiple Dependent			

**Large Entity Small Entity**

Fee Code (\$)	Fee Code (\$)	Fee Description
103	18	203 9 Claims in excess of 20
102	80	202 40 Independent claims in excess of 3
104	270	204 135 Multiple dependent claim, if not paid
109	80	209 40 ** Reissue independent claims over original patent
110	18	210 9 ** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 374.00)

\*or number previously paid, if greater; For Reissues, see above

Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$ 890.00)

**SUBMITTED BY****Complete (if applicable)**

Name (Print/Type)	Marina F. Cunningham	Registration No. (Attorney/Agent)	38,419	Telephone	860.549.5290	
Signature	<i>Marina F. Cunningham</i>				Date	July 6, 2001

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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